PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/010,283			ing Date 13/2001	To be Mailed		
APPLICATION AS FILED – PART I (Column 1) (Column 2)									SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
FOR			NUMBER FILED		NUMBER EXTRA		П	RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)		
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		ı	N/A		1	N/A			
	SEARCH FEE (37 CFR 1.16(k), (i),	or (m))	N/A		N/A		l	N/A		1	N/A			
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A		N/A			N/A			N/A			
	FAL CLAIMS CFR 1.16(i))		minus 20 =					x \$ =		OR	x \$ =			
IND (37	EPENDENT CLAIM CFR 1.16(h))	S	m	inus 3 =	•		l	x \$ =		1	x \$ =			
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addi	If the specification and dra sheets of paper, the applic is \$250 (\$125 for small ent additional 50 sheets or frac 35 U.S.C. 41(a)(1)(G) and			n size fee due for each n thereof. See								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))										1				
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL		1	TOTAL			
	APP	OED – F	_	SMALL ENTITY			OTHER THAN OR SMALL ENTITY							
AMENDMENT	11/15/2006	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)		
	Total (37 CFR 1.18())	· 46	Minus	↔ 45		= 1		x \$ =		OR	X \$50=	50		
	Independent (37 CFR 1.16(h))	• 6	Minus	•••6		= 0	1	x \$ =		OR	X \$200=	0		
	Application Size Fee (37 CFR 1.16(s))													
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))									OR				
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	50		
(Column 1) (Column 2) (Column 3)														
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	IBER OUSLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)		
	Total (37 CFR 1,16(i))		Minus	**		=		x \$ =		OR	x s =			
	Independent (37 CFR 1,16(h))		Minus	***				x \$ =		OR	x \$ =			
핇	Application Size Fee (37 CFR 1.16(s))]			1				
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))							TOTAL		OR				
										OR	TOTAL ADD'L FEE			
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.													

has collection of information is organic by 37 CFR 1,10. The information is required to obtain or retain a benefit by the public which is in the final representation of the process and any potential of the process and any potential or Confederation (FR 1, 10 the information Confederation) is operanding by 30 LS C 1,22 and 37 CFR 1.4 th This collection is estimated to the bit 2 trainities to complete in excluding pathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this borton, should be sent to the Child referension Officer. U.S. Plantin and Trickmark Office. U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.